

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	b. H.	66245	10-14-99
O.I.P.E. CLASSIFIER		59	1016
FINALITY REVIEW		71022	10-22-99

INDEX OF CLAIMS

☐ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ N Non-elected  
☐ I Interference  
☐ A Appeal  
☐ O Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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